

Membership Application

MEMBERSHIP NUMBER (IF REINSTATING)

BC's Union for Professionals

I hearby apply for membership in the Professional Employees Association, an organization formed to represent its members in collective bargaining, and to promote the welfare and to encourage the highest professional standards of its members. I appoint the Association as my sole bargaining agent and agree to be bound by the Association's Constitution and Bylaws.

I understand that my monthly dues will be collected by payroll deduction or such other method as the Executive of the Association may determine and at the rate approved by membership.

Please fill in all information, print, sign and return to the office by email to membership@pea.org, fax, or mail.

SURNAME		GENDER
FIRST NAME		
Home Address		
ADDRESS (INCLUDING APT NO)		
CITY/PROVINCE	POSTAL CODE	
HOME PHONE	CELL PHONE	
EMAIL	FAX	

Work Address

MEMBERSHIP STATUS

Work Mailing Address		Physical Work Address (If different from work mailing address)			
DEPARTMENT		DEPARTMENT			
MINISTRY OR HEALTH AUTHORITY (IF APPLICABLE)		MINISTRY OR HEALTH AUTI	MINISTRY OR HEALTH AUTHORITY (IF APPLICABLE)		
STREET ADDRESS/PO BOX NUMBER		STREET ADDRESS	STREET ADDRESS		
CITY		CITY	CITY		
PROVINCE	POSTAL CODE	PROVINCE	POSTAL CODE		
PHONE	FAX				
WORK EMAIL					

Please make sure you submit both sides of this form if you are faxing or scanning



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NAME			
Employment Details	.		
JOB TITLE		EMPLOYEE NUMBER	
PROFESSION/CLASSIFICATION		PEA CHAPTER	
EMPLOYER		EMPLOYMENT STATUS	
EMPLOYMENT START DATE (YEAR/MONTH	/DAY)	DATE OF APPLICATION (YEA	AR/MONTH/DAY)
PEA Communication	s Options		
PREFERRED MAIL ADDRESS			
PREFERRED EMAIL ADDRESS			
SEND THE PEA NEWSLETTER THE PROFESS	SIONAL TO:		
PEA website. Members will receive an em	ail with a link to the secured	area of the website, where they will be req	e.g. bargaining) is available in the secure section of the uired to login to access the information. Please note a a home email address is important so we can contact
Information collected will be used for Policy, please visit pea.org/privacypol		ormation and research on matters aff	ecting union members. To view the full Privacy
NOTE: Current PEA members can upoverification before being updated in t	date their membership an he PEA membership data	nd contact details by visiting the PEA values. Members with general membe	rebsite at pea.org/user. All changes are subject to rship inquiries can email membership@pea.org.
SIGNATURE (original signature, please)		DATE (YEAR/MONTH/DAY)	
		For Office Use Only	
	DATE RECEIVED	MEMBER NO.	
		CHAPTER	
		PROCESS DATE	
		PROCESSED BY	